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Bib Data Sheet

CONFIRMATION NO. 6666

SERIAL NUMBER 10/808,860	FILING DATE 03/24/2004 RULE	CLASS 206	GROUP ART UNIT 3728	ATTORNEY DOCKET NO. 9730-3
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APPLICANTS

White Bud, Redmond, OR;

** CONTINUING DATA ***** ¹⁰⁰

This appln claims benefit of 60/457,376 03/24/2003

** FOREIGN APPLICATIONS ***** ¹⁰⁰

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/07/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY OR	DRAWING 1	CLAIMS 8	CLAIMS 1
Verified and Acknowledged	<u>100-10</u> <u>700</u> Examiner's Signature Initials				

ADDRESS

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TITLE

Safety survival kit

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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